



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

CONFIRMATION NO. 2875

Bib Data Sheet

SERIAL NUMBER 10/008,125	FILING DATE 11/05/2001  RULE	CLASS 345	GROUP ART UNIT 2173	ATTORNEY DOCKET NO. 2000P09139 US01
-----------------------------	---------------------------------------	--------------	------------------------	---

APPLICANTS

Rand Monteleone, Acton, MA;  
 John E. Auer, Ipswich, MA;  
 Paul Gilman, Gloucester, MA;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/248,086 11/13/2000 *Yes KV*  
*None KV*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 01/02/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Kieu Vu</i> <i>KV</i> Examiner's Signature Initials	STATE OR COUNTRY MA	SHEETS DRAWING 14	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
--	--	---------------------------	-------------------------	-----------------------	----------------------------

ADDRESS  
 JACK J. SCHWARTZ & ASSOCIATES  
 1350 BROADWAY SUITE 1507  
 NEW YORK , NY  
 10018-7702

TITLE  
 System and method for navigating patient medical information

FILING FEE  RECEIVED 954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---